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FEC  
FORM 3

**REPORT OF RECEIPTS  
AND DISBURSEMENTS**  
For An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT ▼ Example: If typing, type over the lines.

12FE4M5

LEWING ILLINOIS COMMITTEE

ADDRESS (number and street)

11647 MOCKINGBIRD LN

Check if different  
than previously  
reported. (ACC)

PONTIAC

IL 61764-

2. FEC IDENTIFICATION NUMBER ▼

C 00250555

CITY ▲

STATE ▲

ZIP CODE ▲

STATE ▼ DISTRICT

3. IS THIS  
REPORT



NEW  
(N)

OR



AMENDED  
(A)

IL

15

4. TYPE OF REPORT (Choose One)

(a) Quarterly Reports:



April 15 Quarterly Report (Q1)



July 15 Quarterly Report (Q2)



October 15 Quarterly Report (Q3)



January 31 Year-End Report (YE)



Termination Report (TER)

(b) 12-Day PRE-Election Report for the:



Primary (12P)



General (12G)



Runoff (12R)



Convention (12C)



Special (12S)

Election on

MM / DD / YYYY

MM / DD / YYYY

MM / DD / YYYY

in the  
State of

IL

(c) 30-Day POST-Election Report for the:



General (30G)



Runoff (30R)



Special (30S)

Election on

MM / DD / YYYY

MM / DD / YYYY

MM / DD / YYYY

in the  
State of

IL

5. Covering Period

04 / 01 / 2010

06 / 31 / 2010

through

06 / 31 / 2010

06 / 31 / 2010

06 / 31 / 2010

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer

THOMAS LEWING

Signature of Treasurer

*Thomas Lewing*

Date

07 / 10 / 2010

07 / 10 / 2010

07 / 10 / 2010

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.

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FEC FORM 3  
(Revised 02/2003)

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